

SM Exhibit CI

1 UNITED STATES DISTRICT COURT  
2 SOUTHERN DISTRICT OF NEW YORK

3 -----X  
4 ADRIAN SCHOOLCRAFT,  
5 Plaintiff,

Case No:  
10 CV 06005

6 - against -

7 THE CITY OF NEW YORK, ET AL.,

8 Defendants.  
9 -----X

10  
11 100 Church Street  
12 New York, New York

13 January 30, 2014  
14 10:22 a.m.  
15  
16

17 DEPOSITION OF CATHERINE LAMSTEIN-REISS, M.D.,  
18 pursuant to Subpoena, taken at the above  
19 place, date and time, before DENISE ZIVKU, a  
20 Notary Public within and for the State of  
21 New York.  
22  
23  
24  
25

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(Continued.)

1 C. LAMSTEIN-REISS, M.D.

2 A. That I gave that feedback to Dr.  
3 Ciuffo, not necessarily. That if something  
4 that was part of our evaluation that I gave  
5 feedback to the officer, yes, that's  
6 documented.

7 Q. I'm not asking about your  
8 feedback with the officer. I am asking  
9 about your feedback to the physician who  
10 referred the patient or the person to you.  
11 That's all I am focusing on. Can we stay  
12 focused on that?

13 A. Yes. This says treatment  
14 recommended. I recommended a treatment with  
15 a psychologist and medication evaluation  
16 with a psychiatrist.

17 Q. I understand that. I can read  
18 that just as clearly as you can --

19 A. I'm not clear --

20 Q. But the problem is that you came  
21 back after the break and you told me that  
22 you not only recommended this, but you  
23 recommended some other things, long-term  
24 therapy and a psychiatrist and I'm trying to  
25 clarify in my mind, whether or not there's

1 C. LAMSTEIN-REISS, M.D.

2 him, right?

3 MS. PUBLICKER METTHAM:

4 Objection.

5 Q. Am I correct about that, you  
6 weren't recommending it?

7 MS. PUBLICKER METTHAM:

8 Objection.

9 A. I recommended that to deal with  
10 issues other than the physical symptoms of  
11 stress.

12 Q. Were you recommending on April  
13 15, 2009 long-term therapy for Schoolcraft,  
14 yes or no?

15 A. Yes.

16 Q. Were you recommending --

17 A. That was one of my two  
18 recommendations -- three recommendations.

19 Q. Were you recommending -- were  
20 you recommending that Schoolcraft take any  
21 kind of medication as of April 15, 2009?

22 MS. PUBLICKER METTHAM:

23 Objection.

24 A. I never make such  
25 recommendations.

1 C. LAMSTEIN-REISS, M.D.

2 Q. So the answer to my question is,  
3 no, you didn't make a recommendation?

4 A. Correct, because it's outside my  
5 scope of practice.

6 Q. Well, whether it's inside or  
7 outside your scope of practice, you  
8 understand that it's a possibility that  
9 somebody could do something even though it's  
10 outside of the scope of their practice.  
11 That's a possibility; isn't it?

12 MS. PUBLICKER METTHAM:

13 Objection.

14 A. Could somebody do something  
15 outside their scope of practice, sure --

16 Q. All right, okay, did you  
17 recommend --

18 A. I can give you plumbing advice,  
19 I'm not a plumber. You could listen to it  
20 or not listen to it.

21 Q. All right, well, did you  
22 recommend that Schoolcraft take antianxiety  
23 medication at any time on or before  
24 April 15, 2009?

25 MS. PUBLICKER METTHAM:

1 C. LAMSTEIN-REISS, M.D.

2 Objection.

3 A. I did not because it would be  
4 outside of my scope of practice to do so.

5 Q. Where in your notes is the  
6 reference to you recommending that  
7 Schoolcraft go see a psychiatrist?

8 A. I would have to refer to my  
9 notes.

10 Q. And if you could use the  
11 exhibit, that will be more helpful.

12 A. I'll find it -- it would be  
13 easier for me to find it here. Then I will  
14 find the exact page through here. The same  
15 page number that included that telephone  
16 contact with Dr. Ciuffo.

17 MS. PUBLICKER METTHAM: So that  
18 is NYC2997.

19 A. Correct.

20 Q. Where on that page?

21 A. Under where it says feedback  
22 given to MOS.

23 Q. The middle of the page, the top  
24 of the page, the bottom of the page?

25 A. About a quarter of the way down.

1 C. LAMSTEIN-REISS, M.D.  
2 Provided MOS with psycho education. In that  
3 paragraph.

4 MS. PUBLICKER METTHAM: I will  
5 just note for the record it's also  
6 found on the document bearing Bates  
7 Number D306.

8 A. It may be also in here too, but  
9 that's --

10 Q. What's the date of this entry?

11 A. April 13, 2009.

12 Q. Where did you see that date? Is  
13 that on the prior page?

14 A. Yes.

15 Q. At the top where the f-i-f-t  
16 something O Adrian Schoolcraft?

17 A. Say cont for c-o-n-t, like  
18 continuation of F/F meaning face-to-face  
19 with DO Adrian Schoolcraft on 4/13/09.

20 MS. PUBLICKER METTHAM: And  
21 again, this page is NYC2996 and NYC --  
22 or I'm sorry D305.

23 Q. Can you read the entry that  
24 you're referring to feedback given to MOS,  
25 after that what does the entry say?



1 C. LAMSTEIN-REISS, M.D.

2 A. Sure. Provided MOS with psycho  
3 education on mind body connection and urged  
4 him to see a psychologist who specializes in  
5 that. He agreed. Also, recommended a  
6 medication evaluation with a psychiatrist  
7 instead of his primary care physician, but  
8 he declined, preferring to avoid meds if  
9 possible.

10 MR. CALLAN: Off the record.

11 (Discussion off the record.)

12 Q. Is there a reference in your  
13 notes to you recommending that he do  
14 long-term therapy?

15 A. I believe there is. Let me find  
16 it. I don't see it my notes. However, it's  
17 very clear in my mind. The initial  
18 interview and I may have -- if I did mention  
19 it in the subsequent interviews, it will be  
20 on the recordings.

21 Q. So you don't see a reference in  
22 your file recommending long-term therapy; is  
23 that right?

24 A. I don't, because that was not  
25 what was most important for the fitness for

1 C. LAMSTEIN-REISS, M.D.

2 duty evaluation. It was for his own  
3 personal benefit.

4 Q. So, it wasn't that important; is  
5 that what you're saying to me?

6 MS. PUBLICKER METTHAM:

7 Objection.

8 A. To the decision about at what  
9 point we would return him to full duty work  
10 whether or not he dealt with those issues  
11 would not have been an issue, as far as  
12 fitness for police duty. For his own  
13 personal life satisfaction, it would have  
14 been helpful.

15 Q. What did Schoolcraft have to do  
16 in order to return to full duty?

17 MS. PUBLICKER METTHAM:

18 Objection.

19 A. He would have, you know, he  
20 would have needed to have been assessed as  
21 being psychologically fit for full duty. My  
22 biggest concerns would be that he was  
23 asymptomatic for a period of time. I would  
24 have felt much better about returning him  
25 had he done the stress management training

1 C. LAMSTEIN-REISS, M.D.

2 to know that should stressful -- when  
3 stressful things happen with his life again  
4 that these symptoms would not reoccur. We  
5 need a significant period of time to know  
6 that things really are calm and it's  
7 possible. It's not something that I had  
8 discussed with supervisors at that point,  
9 but it's possible that we might have been  
10 able to return him to full duty without  
11 being able to speak to the doctor who  
12 prescribed the Seroquel. Some doctor  
13 thought he needed an antipsychotic and it  
14 would not be prudent of us to give someone  
15 back their gun in position of police  
16 authority without knowing why that was.

17 Q. Well, did you ever find out why  
18 some physician prescribed Seroquel?

19 A. The officer refused to allow me  
20 to obtain that information.

21 Q. Who was it that prescribed  
22 Seroquel?

23 A. Dr. Sure.

24 Q. How do you know that Dr. Sure  
25 prescribed Seroquel?

1 C. LAMSTEIN-REISS, M.D.

2 A. Because Officer Schoolcraft told  
3 me that he did and that Officer Schoolcraft  
4 told me he was not sure why it was  
5 prescribed.

6 Q. Don't you, as a doctor reviewing  
7 the fitness for duty of a police officer,  
8 have a right to gain access to his medical  
9 file?

10 A. No. We do not have a right to  
11 do that without his written permission. We  
12 do have a right to say that the person  
13 cannot be cleared to go back to full duty if  
14 we don't have it. But he is not required to  
15 release his personal medical information if  
16 he does not want to.

17 Q. So am I correct that you would  
18 not have returned Schoolcraft to full duty  
19 without getting a release from him to talk  
20 to Dr. Sure about why Sure prescribed  
21 Seroquel?

22 MS. PUBLICKER METTHAM:

23 Objection.

24 A. I don't know because I do not  
25 make those decisions by myself and I had not

1 C. LAMSTEIN-REISS, M.D.  
2 you were the psychologist that had seen  
3 Schoolcraft when he called?

4 MS. PUBLICKER METTHAM:

5 Objection.

6 A. I don't believe he did. What  
7 happens is they call the sick desk  
8 supervisor, who looks up and sees who is on  
9 duty and they call whoever is on duty.

10 Q. So on October 31, 2009, you  
11 happened to be on pager duty?

12 A. Correct.

13 Q. So Captain Lauterborn called the  
14 sick desk and he was looking for somebody  
15 from the psychological evaluation services?

16 MS. PUBLICKER METTHAM:

17 Objection.

18 A. Psychological evaluation  
19 section. Although, the psychological  
20 services section, which does pre-employment  
21 screening, they also do pager duty. He was  
22 looking for a department psychologist to  
23 give him a call to consult about the  
24 situation.

25 Q. Did you tell Captain Lauterborn

Page 319

1 C. LAMSTEIN-REISS, M.D.

2 you had evaluated and met with Schoolcraft?

3 A. Yes.

4 Q. And told him that during the  
5 conversation that you had with him on  
6 October 31st?

7 A. Yes.

8 Q. What else did you tell Captain  
9 Lauterborn?

10 A. He was asking me if there was  
11 any reason to be concerned about the fact  
12 that he went AWOL and that he seemed to be  
13 upset and said he had stomach pains and  
14 should they be concerned, do they need to go  
15 look for him, make sure he's okay.  
16 Typically, in that situation they do. He  
17 said he wasn't sure they wanted to suspend  
18 him, because they thought this was more of a  
19 psychological problem as opposed to a  
20 disciplinary one and so he wanted to consult  
21 with me.

22 I told him that as of the last  
23 time I saw him, which was a few days  
24 earlier, I had no reason to think he was a  
25 danger to himself or others. Never

1 C. LAMSTEIN-REISS, M.D.  
2 expressed thoughts of suicide. It didn't  
3 seem to be anything that serious that would  
4 lead me to be concerned. However, he had  
5 also never acted like that before. He never  
6 went AWOL, leaving even though he was told  
7 to stay and was now saying he had stomach  
8 pains, while being visibly upset. So I did  
9 not know if that meant something new  
10 happened that led him to be so upset that he  
11 was acting in a different manner going AWOL  
12 and that kind of stuff and led to a  
13 reoccurrence of stomach pains badly enough  
14 that he did that or maybe the stomach pains  
15 never went away to begin with and I wasn't  
16 sure and that my evaluation is -- even  
17 though, I was not saying this person is  
18 suicidal, he's had these thoughts, you must  
19 -- it was nothing like that. I had no  
20 reason to think he was, except my evaluation  
21 was only as good as the last time I saw  
22 them.

23 So if something happened since  
24 then or they're acting different since then,  
25 that may be different. And so I thought he

1 C. LAMSTEIN-REISS, M.D.

2 absolutely did need to find him and make  
3 sure that he was okay.

4 Q. Was your sharing of information  
5 about Schoolcraft with Lauterborn a  
6 violation of Schoolcraft's privacy?

7 MS. PUBLICKER METTHAM:

8 Objection.

9 A. No. This is -- they're not  
10 treatment records. Whenever they come to  
11 our office before they -- before I allow  
12 them to open their mouth on all, I make sure  
13 that they know that the interview is on the  
14 record only within the department and only  
15 on a need to know basis, so within that it  
16 is on the record.

17 So in this case, someone is AWOL  
18 and they're upset and they leave and they  
19 say their stomach hurts and they're acting  
20 in that manner, I deemed there was a need to  
21 know, for him to know some basic information  
22 about why he was on restricted duty. Not  
23 information like, you know, whether or not  
24 his father used -- had any kind of drug  
25 problem, whether or not he's had sex in the



1 C. LAMSTEIN-REISS, M.D.  
2 last few years. I mean, like that's not his  
3 business. He doesn't need to know that.  
4 That does not relate to the situation at  
5 hand.

6 What did relate was issues of do  
7 we need to be concerned about this guy and  
8 so I released information that I deemed  
9 pertinent to that, while keeping everything  
10 else as confidential. Like I said, even  
11 though it's on the record within the  
12 department, it's an NYPD evaluation. It's  
13 not private treatment records. Not  
14 everything needs to be known -- to be given  
15 out rather.

16 Q. The entry here says that Captain  
17 Lauterborn kept you informed throughout the  
18 night; is that right, he did that?

19 A. Correct.

20 Q. Did he tell you that he spoke  
21 with Schoolcraft's father?

22 A. I would have to reference my  
23 notes, but I believe he did. Yes, he  
24 definitely did.

25 Q. Did he tell you that

1 C. LAMSTEIN-REISS, M.D.  
2 about discussing this delayed entry with  
3 anybody?

4 MS. PUBLICKER METHAM:  
5 Objection.

6 MR. KRETZ: She's answered that.

7 MR. SMITH: I think she has --

8 A. I only recall at some point --  
9 at some point I reviewed all my notes with  
10 IAB --

11 Q. But you don't have a  
12 recollection sitting here today --

13 A. No.

14 Q. -- of discussing?

15 A. I don't recall if that was  
16 before or after I made that entry.

17 Q. Do you have a recollection  
18 sitting here of discussing the delayed entry  
19 with IAB?

20 MS. PUBLICKER METHAM:  
21 Objection.

22 A. No. I recall discussing the  
23 full case and that would have been part of  
24 it if that conversation was after that date.

25 Q. All right, thank you. I think I

1 C. LAMSTEIN-REISS, M.D.

2 understand what you're telling me. Did you  
3 ever speak with anybody from the media about  
4 Schoolcraft?

5 A. No. We never speak to the  
6 media.

7 Q. Okay. So you never spoke to  
8 anybody from the media about Schoolcraft,  
9 right?

10 A. Correct.

11 Q. Continue reading the delayed  
12 entry.

13 THE WITNESS: Do you have where  
14 I left off?

15 Q. The first sentence ends with in  
16 writer's memory.

17 A. Undersigned.

18 Q. Undersigned's memory, right.  
19 Can you go on from there?

20 A. From there, Captain Lauterborn  
21 asked if MOS was suicidal or depressed  
22 because he needed to know how concerned they  
23 should be about MOS's safety given his going  
24 AWOL, not answering phone calls, not  
25 answering door of home, but his car was

1 C. LAMSTEIN-REISS, M.D.  
2 there, et cetera. I informed captain that I  
3 last saw MOS at PES on 10/27/09 and at that  
4 time he looked okay and reported being  
5 asymptomatic. At no time had he ever  
6 expressed thoughts of suicide, but he also  
7 never went AWOL before and acted the way he  
8 was acting on 10/31/09. My assessment of  
9 his suicide risk is only as good as the last  
10 time I saw him. If something happened after  
11 and led him to be so upset that he left work  
12 without permission an hour before the end of  
13 his tour, said he had stomach pains, et  
14 cetera. Then I am unable to say with any  
15 reasonable amount of certainty that he is  
16 not at risk for suicidal ideation under  
17 present circumstances.

18 I provided captain with basic  
19 information about reason MOS was on  
20 restricted duty. That he had significant  
21 physical symptoms of stress insomnia, GI  
22 symptoms, cardiac symptoms, et cetera.  
23 Unclear if MOS was reporting openly on  
24 10/27/09 when he said all of his symptoms  
25 went away without treatment. Motivation to

1 C. LAMSTEIN-REISS, M.D.  
2 minimize is that he did not want to be  
3 psychological restricted duty. He was open  
4 during initial evaluation, but denied any  
5 and all symptoms in subsequent monitoring  
6 sessions. When also expressed being upset  
7 about being on psychological restricted  
8 duty. His reporting on 10/31/09 that he had  
9 stomach pains severe enough to warrant  
10 leaving work before end of tour without  
11 permission suggests either the symptoms  
12 never did go away or they reoccurred on  
13 10/31/09 due to his being really upset about  
14 something. It is also possible that there  
15 was medical cause for the stomach pain, but  
16 the angry manner in which he left work  
17 suggests a psychological cause and I signed  
18 my name.

19 MS. PUBLICKER METTHAM: D284

20 and --

21 MR. OSTERMAN: 2890.

22 Q. Had you, when you prepared this  
23 note, any thoughts that there was going to  
24 be litigation about what happened to  
25 Schoolcraft on October 31, 2009?

1 C. LAMSTEIN-REISS, M.D.

2 MS. PUBLICKER METTHAM:

3 Objection.

4 A. I don't remember. I would have  
5 to refer to my full notes, including  
6 redacted information.

7 Q. When did it first occur --

8 A. I don't recall.

9 Q. You don't recall?

10 A. I don't recall.

11 Q. Had you been named as a  
12 defendant in those two lawsuits Howard and  
13 Nelson as of the time of this delayed entry?

14 MS. PUBLICKER METTHAM:

15 Objection.

16 A. Howard -- this more recent than  
17 that. Actually, I am really not sure. I  
18 think -- I don't remember the dates of those  
19 when they first started.

20 Q. Have you ever made a delayed  
21 entry like this in a patient's file or file  
22 like this?

23 MS. PUBLICKER METTHAM:

24 Objection.

25 A. Yes.